(c) During 1985-86 allocation for the projects is as under:—

Kanti . . .	Rs. 22 crores
Koel-karo . .	Rs. 1.0 crore
Kahalgaon . .	Rs. 15.73

The allocation for 1986-87 will be made only at the beginning of next year.

Non-attaching of 3 tier Coach to Konark Super Express

856. SHRI PARVATHANENI UPENDRA: Will the Minister of RAILWAYS be pleased to state:

(a) whether it is a fact that on 18th May, 1985 no second class 3tier coach was attached to the Konark Super Express from Hyderabad to Bhubaneswar despite the fact that public had been given advance confirmed reservations;

(b) whether it is also a fact that due to the lapse on the part of the Railways many passengers holding confirmed reservation tickets could not board the train;

(c) whether it is also a fact that passengers were put to a lot of inconvenience because the TTE on duty was absent; and

(d) if the reply to parts (a), (b) and (c) above be in the affirmative, what steps have been taken to check recurrence of such incidents?

THE MINISTER OF RAILWAYS (SHRI BANSI LAL): (a) to (c) On 18-5-1985 one of the sleeper coaches in 20 Konark Express was replaced by a second class coach as no spare sleeper coach was available. As against a quota of 36 berths for Secunderabad in this coach, only 14 berths were booked and these passengers were accommodated in other coaches by the TTE and Train Superintendent

(d) All efforts will be made to provide Sleeper coaches.

Setting up of Health Field Survey Units

857. SHRI PARVATHANENI UPENDRA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government are planning to set up Health Field Survey Units in remote areas so that their benefits percolate down to the poorest of the poor;

(b) if so, what are the details of the Scheme; and

(c) the provisions made in the Seventh Plan to make this Scheme a success?

THE MINISTER OF IRRIGATION AND POWER (SHRI B. SHANKARANAND): (a) to (c) There is no specific proposal of setting up Health Field Survey Units in remote areas. However, the field Survey Units under Health Intelligence Evaluation and Surveys Scheme, are utilised for determining the Health Assessment needs of the population of remote areas also. An amount of Rs. 10.55 lac has been provided for this Scheme in the 1985-86 Plan. The Seventh Five-Year Plan outlays have not been decided yet.

Refusal of Taxi and Scooter Drivers to go to Short Distances.

858. DR. MOHD. HASHIM KIDWAI: Will the Minister of SHIPPING AND TRANSPORT be pleased to state:

(a) whether it is a fact that both at Delhi junction and New Delhi Railway Station taxi and scooter drivers refuse to take passengers including Members of Parliament to Western Court, Windsor Place, Connaught Place, Dr. Rajendra Prasad Road, Kasturba Gandhi Marg and as a result thereof considerable hardship is caused to railway passengers; and

(b) what remedial measures Government propose to take to remove the hardship?

THE MINISTER OF STATE OF THE MINISTRY SHIPPING AND TRANSPORT (SHRI Z. R. ANSARI): (a) and (b) Instances have come to notice regarding the refusal by Scooter/Taxi drivers, to carry short-distance passengers. The steps taken by Traffic Police authorities and Directorate of Transport Delhi Administration, to curb these type of incidents are as under:

(i) Traffic Assistance Booths at important places, like Railway Stations,

Inter-State Bus Terminal and Palam Airport have been set up. The booths are manned round the clock by responsible police officers, who assist passengers in getting scooters, taxis etc. on their arrival.

(ii) A new Parking system has been adopted wherein scooters and taxis are parked separately in order to make a proper queue system.

(iii) Printed complaints cards are distributed among passengers and such complaints are looked into promptly and erring drivers are challaned.

(iv) A new system of punching/stamping the driving licences has been introduced which may result in cancellation of the licences of the recalcitrant drivers on the committing of three consequent offences.

Power Generation Policy

859. SHRI ASHWANI KUMAR:
SHRI S. W. DHABE:

Will the Minister of IRRIGATION AND POWER be pleased to state:

(a) whether there has been a new thinking in Government regarding power generation policy;

(b) whether it is proposed to make applicable to the public sector for common people and in private sector for several industries;

(c) whether there is any proposal for joint sector projects; and

(d) if so, which are the projects that are under consideration of the Government and in which States?

THE MINISTER OF STATE IN THE DEPARTMENT OF POWER (SHRI ARUN NEHRU): (a) to (d) The policy being followed conforms to the Industrial Policy Resolution of 1956. This Resolution contemplates that the future development of the generation and distribution of electricity is the exclusive responsibility of the State. The Resolution, however, does not preclude the expansion of the existing privately owned units or the possibility of the State securing the cooperation of private enterprise in the establishment of new units when the national interests so require. Permission to instal captive plants is given, where the requirement of power is large and continuous and reliable power is necessary. No detailed proposals for a joint sector project has been received by the Central Government although some suggestions have been received.

सफदरजंग अस्पताल का कार्यकरण

860. **श्री जगदम्बी प्रसाद यादव :** क्या स्वास्थ्य और परिवार कल्याण मंत्री यह बताने की कृपा करेंगे कि :

(क) पिछले दो वर्षों के दौरान प्राप्त शिकायतों को देखते हुए सफदरजंग अस्पताल, नई दिल्ली के कार्यकरण में अब तक क्या-क्या सुधार किए गए हैं ;

(ख) क्या यह सच है कि अस्पताल में न तो आमतौर पर मरीजों को दाखिल किया जाता है और न ही विकलांग चिकित्सा विभाग में बिना घूंस दिए खून उपलब्ध कराया जाता है और यदि हां, तो विभाग द्वारा इस संबंध में कोई उपचारी उपाय न किए जाने के क्या कारण हैं; और

(ग) क्या यह भी सच है कि अस्पताल गन्दगी और कुप्रबन्ध की निशानी बन गया है और यदि हां, तो सरकार इस मामले में क्या कार्रवाई करने का विचार रखती है ?

सिंचाई और विद्युत मंत्री (श्री बी० शंकरानन्द) : (क) सफदरजंग अस्पताल का विभिन्न स्तरों पर चरणबद्ध और सुनियोजित ढंग से विकास तेजी से हो सके इसके लिए उस अस्पताल में एक अलग अस्पताल आयोजना सैल खोला गया है । एम्बुलेंस सेवाओं, रेडियलॉजिकल सेवाओं, प्रयोगशाला सेवाओं लाण्ड्री सेवाओं में सुधार किए गए हैं । एक नेफरोलाजी यूनिट तथा रेसपीरेट्री यूनिट भी स्थापित किया गया है तथा डायलिसिस सुविधाओं को बढ़ाया गया है । आपरेशन थियेटर काम्प्लैक्स में एक इमेज इंटैन्सी फायर एण्ड लैमीनेयर - फ्लोज-एयर कण्डीशनिंग सिस्टम लगा कर आर्थोपेडिक सेवाओं में सुधार किया गया है ।